

United States District Court

District of the Northern Mariana Islands

ORIGINAL

JOHN (JACK) ANGELLO,

Plaintiff/Appellant

V.

NORTHERN MARIANAS COLLEGE,

Defendant/Appellee

APPLICATION TO PROCEED IN FORMA PAUPERIS, SUPPORTING DOCUMENTATION AND ORDER

FILED
Clerk
District Court

CASE NUMBER: CV No. 03-0014

NOV - 6 2006

For The Northern Mariana Islands
By _____

(Deputy Clerk)

I, John (Jack) Angello, declare that I am the (check appropriate box)

- ☐ petition/plaintiff
☐ respondent/defendant

☐ movant (filing 28 U.S.C. 2255 motion)

☒ Plaintiff/Appellant
Other

in the above-entitled proceeding; that, in support of my request to proceed without being required to prepay fees, cost or give security therefor, I state that because of my poverty, I am unable to pay the costs of said proceeding or give security therefor; that I believe I am entitled to relief. The nature of my action, defense, or other proceeding or the issues I intend to present on appeal are briefly stated as follows: 1) Whether Court erred in its decision to grant a FRCP 52(c) in favor of defendant; 2) Whether Court erred in that there was no direct or indirect (circumstantial evidence presented; 3) Did Court err in ignoring the civil service protection issue; 4) Whether Court failed to comprehend the evidence fully and correctly.

In further support of this application, I answer the following questions.

1. Are you presently employed? Yes ☒ No ☐
 - a. If the answer is "Yes", state the amount of your salary or wages per month, and give the name and address of your employer. (list both gross and net salary) See attached "Statement of Salary & Obligations"
 - b. If the answer is "No", state the date of last employment and the amount of the salary and wages per month which you received.
2. Have you received within the past twelve months any money from any of the following sources?
 - a. Business, profession or other self-employment? Yes ☐ No ☒
 - b. Rent payments, interest or dividends? Yes ☐ No ☒
 - c. Pensions, annuities or life insurance payments? Yes ☐ No ☒
 - d. Gifts or inheritances? Yes ☐ No ☒
 - e. Any other sources? Yes ☐ No ☒

If the answer to any of the above is "Yes", describe each source of money and state the amount received from each during the past twelve months.

N/A

3. Do you own any cash, or do you have money in checking or savings accounts?

Yes ☒ No ☐ (Include any funds in prison accounts).

If the answer is "Yes", state the total value of the items owned.

No savings account. Checking account: 46 cents as of 11/1/06

4. Do you own or have any interest in any real estate, stocks, bonds, notes, automobiles or other valuable property (excluding ordinary household furnishings and clothing)? 1998 Pickup Truck

Yes ☒ No ☐

If the answer is "Yes", describe the property and state its approximate value.

1998 Pickup Truck = \$2200.00

5. List the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support.

Leonora C. Angello (wife); John (Tony) Angello (son 15 yrs. old). Rent, Utilities, phone and food items, water and house upkeep. See attached.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

11/1/06
(Date)

John Tony Angello
Signature of Applicant

CERTIFICATE

(Prisoner Accounts Only)

I certify that the applicant named herein has the sum of \$ _____ on account to his credit at the _____ institution where he is confined. I further certify that the applicant likewise has the following securities to his credit according to the records of said institution: _____

I further certify that during the last six months the applicant's average balance was \$ _____

Authorized Officer of Institution

ORDER OF COURT

The application is hereby denied

United States Judge

Date

The application is hereby granted. Let the applicant proceed without prepayment of cost or fees or the necessity of giving security therefor

Alex R. Johnson 11-6-06

United States Judge or Magistrate Date

STATEMENT OF SALARY & OBLIGATIONS
PLAINTIFF/APPELLANT
NOVEMBER 1, 2006

Employer: Representative Stanley T. Torres
P.O. Box 500610
Saipan, MP 96950

Monthly: Gross salary: \$2769.26 Net salary: \$1794.74

See attachment No. 1

Obligations:

Rent: \$630.00 per month (See attachment No. 2)
Utilities: \$250.00 per month (approx: See attachment No. 3)
Food, Phone, school supplies, misc: \$750.00 per month (approx)
Vehicle gas and expenses: \$150.00 per month
Sallie Mae College Loan: \$994.34 per month (In forbearance since NMC dismissal in 2002. Plaintiff could not make payments after NMC dismissal.)
Loan payments are due if able to pay, but final suspension until Feb. 2007.
(See attachment No. 4)

Monthly Obligations: \$1780.00 per month
 \$2774.34 per month with Sallie Mae payment


John (Jack) Angello Date



MARIANAS MANAGEMENT CORPORATION

P.O. Box 500137, Saipan, MP 96950
PHONE: (670) 235-8973/8974 • FAX: (670) 235-2969
TELEX NO. 783609 • CABLE ADDRESS: JOETEN SAIPAN

SECOND AND FINAL NOTICE OF DELINQUENT RENT

October 22, 2006

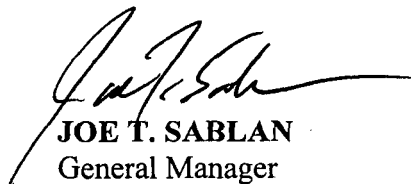
Jack Angelo
FS - 19
P.O. Box 501149
Saipan, MP 96950

Dear Sir:

THIS IS OUR SECOND AND FINAL REQUEST for nonpayment of your delinquent rent amounting to **\$ 630.00** as of this date.

If you have any good faith dispute about your account, please feel free to let us know. You have five (5) days from the receipt of this notice to settle in full your delinquent rent.

Your immediate response is urgently requested.


JOE T. SABLAN
General Manager

ACKNOWLEDGMENT

This is to acknowledge that I received the original copy of this Second Notice of Delinquent Rent.

Received by: _____
(Please print full name and sign)

Date & Time Received: _____

(Please disregard this notice if payment has been made)

2.

COMMONWEALTH UTILITIES CORPORATION

P.O. BOX 501220 • SAIPAN, MP 96950-1220
 TELEPHONE 670-664-6202 (SAIPAN JOETEN DANOAN)
 433-9264 (TINIAN) • 532-9414 (ROTA)

CUSTOMER	BILLING DATE	DUE DATE	DAYS	
47613-5	10/16/06	10/31/06	29	
SERVICE	PREVIOUS	CURRENT	MULT.	USAGE
ELC WTR	9/06	10/05	1	853
	45470	46323	1.0	6000

KEEP THIS STUB/SEE REVERSE SIDE

PAST DUE	239.11
ELEC NON-FUEL - RES	36.90
ELEC FUEL CHARGES *	183.18
WATER - UNMETERED	11.10
SEWER RESIDENTIAL	3.00
TOTAL AMOUNT DUE	473.29

*OCTOBER FUEL RATE IS \$0.194
 PER KWH. THE DUE DATE DOES NOT
 APPLY TO THE PAST DUE AMOUNT.

1-500-001000
 METER # E 67523471 W 0021291

96950 PERMIT NO. 9

CUSTOMER	BILLING DATE	AMOUNT DUE
4		473.2

3.

SallieMae

www.SallieMae.com

P.O. BOX 9500

WILKES BARRE PA 18773-9500

(888) 272-5543

Invoice

04/30/06

JOHN A ANGELLO
PO BOX 501149
SAIPAN MP 96950-1149

MAKE CHECK PAYABLE TO:

SALLIE MAE

AND SEND TO
OUR PAYMENT ADDRESS:

PO BOX 9533
WILKES-BARRE PA 18773-9533

ACCOUNT NUMBER:

9085106682-1

011068332532 90851066820 000099434

CURRENT PHONE IS: (670) 235-8691

Changed your address or phone number?

Please visit www.SallieMae.com to update your information.

Please detach and return with payment.

PAYMENT DUE DATE

05/28/06

PAYMENT AMOUNT DUE

\$ 3,202.69

PRINCIPAL BALANCE	MONTHLY PMT	NEXT DUE DATE	PAST DUE AMT	LATE FEE	TOTAL AMOUNT DUE
\$ 89,007.71	\$ 994.34	05/28/06	\$ 1,988.68	\$ 219.67	\$ 3,202.69
LAST PMT REC'D	LAST PMT AMT	TODAY'S DATE	OTHER CHARGES	CORRESPONDENCE ADDRESS:	
05/01/02	\$ 291.32	04/30/06	\$ 0.00	P.O. BOX 9500 WILKES BARRE PA 18773-9500	

PLEASE NOTE THAT THIS BILLING STATEMENT IS ONLY FOR THE LOANS MARKED WITH AN ASTERISK (*) BELOW. If there are loans that are not marked with an (*) on this bill, you will receive a separate billing statement for those loans. It's very important that you return the appropriate coupon with your monthly payment.

Please pay the amount noted in the **Payment Amount Due** box. All payments must be remitted in U.S. dollars drawn on a U.S. bank.

The **Total Amount Due** box represents the full amount you must pay if you are past due on your monthly payments to bring your account current. The specific past due amount will be noted in the **Past Due Amount** box.

If you send a payment that is larger than the scheduled **Payment Amount**, we will advance your payment due date by the number of whole payments satisfied by the extra funds *unless you specifically state that you do not want us to advance the payment due date*. If you are paid ahead, we will send a monthly billing statement to you shortly before a payment is due.

If you fail to make your scheduled payment, you may be assessed a late fee as stated in your promissory note. If you have a loan under the Federal Family Education Loan Program you may be charged collection costs permitted under the Higher Education Act of 1965, as amended, and U.S. Department of Education regulations (collectively referred to as the "Act") that we incur for collecting installments not paid when due. Collection costs may include, but are not limited to, costs we incur

Loan Information *If you have questions or concerns about your account, write to us at the address provided above.*

The list below includes all the loans in your account with us. Loans marked with a star (*) are the loans referred to in this letter.

LOAN DATE	ORIGINAL LOAN AMOUNT	OUTSTANDING PRINCIPAL	INTEREST RATE	LOAN PROGRAM
* 08/23/94	\$ 8,500.00	\$ 13,429.95	6.100	FFELP
* 08/23/94	9,552.00	20,034.70	6.100	FFELP
* 07/05/95	8,165.00	12,751.64	6.100	FFELP
* 08/22/95	335.00	529.31	6.100	FFELP
* 08/22/95	10,000.00	19,311.17	6.100	FFELP
* 11/09/93	7,500.00	11,932.82	6.100	FFELP

PHONE (888) 272-5543 FAX (800) 848-1949 TDD/TTY (888) 833-7562 24 HRS/7 DAYS www.salliemae.com

Para comunicarse en Español con 'Atención al Cliente',
llame gratis al 1-888-272-5543, y marque el numero correspondiente.

908510668266116499

P099 SYSTEM 0001

* 9 0 8 5 1 0 6 6 8 2 1 6 6 1 1 6 4 9 9 *

4.



JOHN A ANGELLO
PO BOX 501149
SAIPAN MP 96950-1149

Account Number: 9085106682-1

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04/30/06

for returned payments, services to assist in locating you after we have completed activities required by the Act, and collection agency services when your loan is seriously delinquent. If you have a privately insured loan, you may be charged a fee for each returned payment.

According to guidelines issued by the National Automated Clearing House Association (NACHA), financial service providers like Sallie Mae may electronically process payments (checks) received from their customers. Sallie Mae has begun clearing your check electronically as opposed to depositing the paper check. Accordingly, (1) all received checks will clear the bank faster and (2) your check will not be returned to you in your bank statement (neither the original check, nor an imaged copy). In the event that Sallie Mae is unable to process your payment electronically, it will be converted to a paper check. Your bank statement is valid proof of payment. Please note the check debit on your bank statement will reflect Sallie Mae as the payee. If you have any further questions, please visit our web site at www.SallieMae.com.

Any payment presented to Sallie Mae pursuant to a **disputed** sum or balance, and with respect to which you demand complete or partial satisfaction, must be sent to only the following address: Sallie Mae, P.O. Box 3800, Wilkes-Barre, PA 18773-3800, with a detailed account of the alleged dispute and the remedy sought. Sallie Mae reserves the right, at its sole discretion, to return or refund any payment tendered if the payment is noted to pay the account in full and this payment does not equal the amount owed to satisfy your loan debt in full. Such payment at the sole option of Sallie Mae, may be returned or refunded in a form of a corporate check and the requested relief thereby denied.

Loan Information

The list below includes all the loans in your account with us. Loans marked with a star (*) are the loans referred to in this letter.

LOAN DATE	ORIGINAL LOAN AMOUNT	OUTSTANDING PRINCIPAL	INTEREST RATE	LOAN PROGRAM
* 03/01/94	\$ 1,000.00	\$ 1,591.89	6.100	FFELP
* 11/02/93	4,000.00	9,426.23	6.500	FFELP